		•							
(1)	Quarter Ending (check one):	- March 31, 2006	☐ June 30, 20	06 🗆 S	September 30, 200	6 🗆	December :	31, 2006	
(2)	Lobbying Firm Information			(3) List Name	(s) of Firm's Lob	byists Regi	istered durir	ng reporting period:	
	Brobar Group Ir	nć		Barre	H Willia	in C		2016	
ς.	Name of Lobbying Firm	7		Last	First	MI	Last	First C	MI
	Business Address of Lobbying Firm (Street, City, State	;, and Zip)	06	Last	First	MI	Last	First L	MI
	321, 403/1,410			Last	First	MI	Last	深ist 9: 0	MI
	Business Phone (including area code)		*	Last	First additional names are	MI	Last	First	MI
		00 to \$99,999 □\$100,	000 to \$249,999	ring the reporti □\$250,000 to \$	ing period (check		ite box):	□\$1,000,000 or more	
(5)	For each Principal represented by the Lo								
	City of Palm Bay Full Name of Principal DOMalabar Rd Se Palm Bay FL	Full Name of Principal	Cloud Streetusi	Full Name of Prince	cipal	<del></del>	Full Name of I	Principal	
	Business Address of Principal	Business Address of Principal	25 54 (10-2	Business Address	of Principal		Business Add	ress of Principal	
	326 952-3413	(407 957 - 710°		<u></u>					
	Telephone Number of Principal	Telephone Number of Principal	1	Telephone Number	er of Principal		Telephone Nu	umber of Principal	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0\$} \\ \text{\$-10} \\ \$-1	Total compensation provided or lobbying firm for the reporting     \$-0-   \$1 to \$9,999   \$10,000 to \$19,999   \$20,000 to \$29,999   \$30,000 to \$39,999   \$40,000 to \$49,999   \$1f \$50,000 or more, provide specific dollar amount rounded down to nearest \$1,000:\$	period: up or	lobbying firm for to \$-0- \$1 to \$9,999 \$10,000 to \$19,1 \$20,000 to \$29,1 \$30,000 to \$39,1 \$40,000 to \$49,1 \$1f \$50,000 or me \$16 \$16 \$16 \$16 \$16 \$16 \$16 \$16 \$16 \$16	999 999 ore, provide ount rounded up or 1,000:\$	<del></del> -	lobbying firm \$-0- \$1 to \$9,999 \$10,000 to \$ \$20,000 to \$ \$330,000 to \$ \$40,000 to \$ \$1550,000 to \$ \$20,000 to \$ \$20,0	\$19,999 \$29,999 \$39,999 \$49,999 or more, provide r amount rounded up or est \$1,000:\$	
	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Check if this compensate from a lobbying firm subcontibehalf of a principal.  Name and address of principal	tracting work on	from a lobbying behalf of a princ	is compensation was firm subcontracting ipal. s of principal originati	work on	from a lobby behalf of a p	if this compensation was rec ying firm subcontracting wo rincipal. dress of principal originating	rk on
	Full Name of Principal	Full Name of Principal		Full Name of Prin	ncipal		Full Name of	f Principal	
	Business Address of Principal	Business Address of Principal		Business Address	s of Principal		Business Add	dress of Principal	
							<u></u>		
	Telephone Number of Principal	Telephone Number of Princip	al	Telephone Numb	ber of Principal		Telephone N	Number of Principal	

	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	Turrane of Finospur	I dii Name of Manapa	- un	•
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	() Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	()
<b>(6)</b>	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\\\\\\$\\$-0-\$ \$\\$\\$1 to \$\\$9,999\$ \$\\$\\$10,000 to \$\\$19,999\$ \$\\$\\$20,000 to \$\\$29,999\$ \$\\$\\$30,000 to \$\\$39,999\$ \$\\$\\$40,000 to \$\\$49,999\$ \$\\$\\$If \$\\$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\\\\\$\\$-0-\$ \$\\$\\$1 to \$\\$9,999\$ \$\\$\\$10,000 to \$\\$19,999\$ \$\\$\\$20,000 to \$\\$29,999\$ \$\\$\\$30,000 to \$\\$39,999\$ \$\\$\\$40,000 to \$\\$49,999\$ \$\\$\\$\\$I\$\$50,000 or more, provide specific dollar amount rounded up or down to nearest \$\$1,000:\$	Total compensation provided or owed to the obbying firm for the reporting period:  \$-0-\$1 to \$9,999 \$10,000 to \$19,999 \$20,000 to \$29,999 \$30,000 to \$39,999 \$40,000 to \$49,999  If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$
	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	☐ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	☐ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	Telephone Number of Principal	( ) Telephone Number of Principal	( ) Telephone Number of Principal	Telephone Number of Principal  99
	Check if additional principals are lister	d on another page.		
(7)	CERTIFICATION: I hereby cert been omitted; and that no officer of	tify to the veracity and completeness or employee of this lobbying firm has the	of the information submitted herein; the made an expenditure in violation of So	nat no reportable compensation has ection 11.045, F.S.

		<u> </u>							
(1)	Quarter Ending (check one):	March 31, 2006	006		September 30,	2006	December 31,	, 2006	
(2)	Lobbying Firm Information		(3)	List Name	(s) of Firm's	Lobbyists Regi	istered during	reporting period:	
	Ronald L. Book, P.A.		l	Book	Ronald	L	Hanson	Jessica 🗮	M
	Name of Lobbying Firm		Į.	Last	First	MI	Last	First	MI
	* *							rist	
	2999 NE 191 Street, PH6		1	Mallette	Kelly	<u>C</u>		(77.07	
	Business Address of Lobbying Firm (Street, City, Stat	e, and Zip)		Last	First	MI	Last	First	MI
	Aventura, FL 33180			Cheek	Moniq	ue H			
1			1	Last	First	MI	Last	First-<	MI
	(205) 205 4044		1			~		Fig. 7	
	(305) 935-1866 Business Phone (including area code)			Akeson Last	Melissa First	a S MI	Last	<del></del>	MI
İ	Business Phone (including area code)		ł			es are entered on a		Filst O	IVII
<u></u>	77-4-1	Al Library Company ATT and all all all	<u> </u>						
(4)		the lobbying firm from ALL principals d						761 000 000	
		000 to \$99,999		\$250,000 to \$	499,999 L	<b>1</b> \$ 500,000 to \$99	99,999	<b>₫\$1,000,000</b> or more	
(5)	For each Principal represented by the Lo	obbying Firm during the reporting period	:			,			
l	ACC Capital Holdings	American Institute for Public Safety	A	rise Foundatio	n		Ashbritt		
l	Full Name of Principal	Full Name of Principal	Fu	Ill Name of Princ	cipal		Full Name of Prince	cipal	
l	1100 Town & Country Rd, Ste 400, Orange, CA 92868	12000 Biscayne Blvd, Ste 705, N Miami, FL 33181	40	)1 Edmund F. B	enson Blvd, Mia	mi, FL 33178	408 S Andrews Ave,	Ste 103, Pompano Beach, FL 3	3069
l	Business Address of Principal	Business Address of Principal	Bu	isiness Address	of Principal		Business Address	of Principal	
	() (714) 541-9960	() (305) 895-2617		) (305) 592			() (954) 54		
	Telephone Number of Principal	Telephone Number of Principal	Te	elephone Numbe	er of Principal		Telephone Numb	er of Principal	
(6)	Total compensation provided or owed to the	Total compensation provided or owed to the	To	tal compensatio	n provided or ow	red to the		on provided or owed to the	
	lobbying firm for the reporting period:	lobbying firm for the reporting period:			the reporting peri-	od:		the reporting period:	
ı	□\$-0- □\$1 to \$9,999	☑\$-0- □\$1 to \$9,999		\$-0- \$1 to \$9,999			□\$-0- □\$1 to \$9,999		
1	□\$1 to \$9,999 □\$10,000 to \$19,999	□\$10,000 to \$19,999		\$10,000 to \$19,9	999		□\$10,000 to \$19,	999	
	□\$20,000 to \$29,999	□\$20,000 to \$29,999		\$20,000 to \$29,9			□\$20,000 to \$29,		
	□\$30,000 to \$39,999	□\$30,000 to \$39,999		\$30,000 to \$39,9 \$40,000 to \$49,9			□\$30,000 to \$39, □\$40,000 to \$49,		
l	☐\$40,000 to \$49,999 ☐If \$50,000 or more, provide	☐\$40,000 to \$49,999 ☐If \$50,000 or more, provide		1\$40,000 to \$49,5 If \$50,000 or mo			☐\$40,000 to \$49,		
1	specific dollar amount rounded up or	specific dollar amount rounded up or			ount rounded up	or	specific dollar am	ount rounded up or	
1	down to nearest \$1,000: \$	down to nearest \$1,000:\$	do	own to nearest \$1	1,000:\$		down to nearest \$	1,000:\$_50,000.00	
ı	Check if this compensation was received	Check if this compensation was received		Check if the	is compensation	was received	Check if th	is compensation was rece	ived
ı	from a lobbying firm subcontracting work on	from a lobbying firm subcontracting work on			firm subcontrac	ting work on		firm subcontracting wor	k on
1	behalf of a principal.	behalf of a principal.		ehalf of a princ	•		behalf of a princ	-	4
	Name and address of principal originating work:	Name and address of principal originating work:	N	ame and address	s of principal orig	ginating work:	name and addres	s of principal originating w	OFK:
	Full Name of Principal	Full Name of Principal	F	ull Name of Prin	ncipal		Full Name of Prin	ncipal	
	Business Address of Principal	Business Address of Principal	$\overline{\mathbf{B}}$	Business Address	of Principal	·····	Business Address	s of Principal	
	()	()	(				<u></u>		
1	Telephone Number of Principal	Telephone Number of Principal	T	elephone Numb	per of Principal		Telephone Numl	ber of Principal	

(3)	For each Principal represented by the L	oppying Firm during the reporting period	(conunued from page 1):		
	Associated Industries of Florida	Auto Nation, Inc.	Bail Agents Independent League of Florida	Bell Care Nurses Registry, Inc.	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	516 N Adams St, Tallahassee, FL 32302	450 E Las Olas Blvd, 12th Floor, Ft Lauderdale, FL 33301	424 S Congress Ave, West Palm Beach, FL 33406	1150 NW 125th St, North Miami, FL 33161	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	(850) 224-7173	( ) (954) 769-2039	( ) (561) 686-2221	(305) 654-1614	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \leq \leq \leq \leq \leq \leq \leq \leq	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	_	-		Business Address of Principal	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Ø	Check if additional principals are lister	d on another page.		FID BY OS	
(7)			of the information submitted herein; the made an expenditure in violation of So		
	Date:	Signature:	Title:		
	<i></i>	(Original Signature Required)	11uc	nior Partner, Officer, or Owner of Lobbying Firm	

BellSouth	Best Buddies International	Biscayne Bay Pilots	<b>Broward County</b>	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
150 S Monroe St, Ste 400, Tallahassee, FL 32301	100 SE 2nd St, Ste 2200, Miami, FL 33131	2911 Port Blvd, Miami, FL 33132	115 S Andrews Ave, Ft Lauderdale, FL 33301	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
( ) (850) 577-5500	( ) (305) 374-2233	( ) (305) 375-9453	(954) 357-7357	
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\\$\\$1 to \$9,999\$ \$\\$\\$10,000 to \$19,999\$ \$\\$\\$20,000 to \$29,999\$ \$\\$\\$30,000 to \$39,999\$ \$\\$\\$40,000 to \$49,999\$ \$\\$\\$\\$if \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$ \$\Begin{array}{c} \Begin{array}{c} a	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \preceq	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \perp \\ -0 \\ \perp \\ \per	
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
( )		( )		
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
			9: 05	
Check if additional principals are listed	d on another page.			
CERTIFICATION: I hereby cert been omitted; and that no officer or	tify to the veracity and completeness or employee of this lobbying firm has r	of the information submitted herein; the made an expenditure in violation of Se	hat no reportable compensation has ection 11.045, F.S.	
Date:	Signature:	Title:		
	Original Signature Required)	1146.	nior Partner, Officer, or Owner of Lobbying Firm	

Children's Home Society	Children's Services Council of Florida	City of Aventura	City of Cooper City	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
1485 Semoran Blvd, Ste 1448, Winter Park, FL 32792	1900 Biscayne Blvd, Miami, FL 33132	19200 W Country Club Dr, Aventura, FL 33180	9090 SW 50 Pl, Cooper City, FL 33329	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
( ) (321) 397-3000	( ) (305) 571-5700	(305) 466-8910	(954) 434-4300	
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\\$\\$1 to \$\$9,999\$ \$\\$\\$10,000 to \$\$19,999\$ \$\\$\\$20,000 to \$\$29,999\$ \$\\$\\$30,000 to \$\$39,999\$ \$\\$\\$\$40,000 to \$\$49,999\$ \$\\$\\$\$If \$\$50,000 or more, provide specific dollar amount rounded up or down to nearest \$\$1,000:\$ \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0-} \\ \text{\$\sigma} \text{\$1\$} \text{\$\text{\$0,000}\$ to \$\$19,999} \\ \Begin{array}{l} \text{\$\text{\$\text{\$0,000}\$ to \$\$29,999} \\ \Begin{array}{l} \text{\$\text{\$\text{\$0,000}\$ to \$\$39,999} \\ \Begin{array}{l} \text{\$\text{\$\text{\$\text{\$0,000}\$ to \$\$49,999} \\ \Begin{array}{l} \Begin{array}{l} \text{\$\text{\$\text{\$\text{\$0,000}\$ or more, provide specific dollar amount rounded up or down to nearest \$\$1,000:\$\\ \Begin{array}{l} \Begin{array}{l} \Left \text{\$\text{\$\text{\$\text{\$0,000}\$}} \\ \Begin{array}{l} arra	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{l} \Pi \p	
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	( )	( )		
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Check if additional principals are list	ed on another page.			
CERTIFICATION: I hereby ce been omitted; and that no officer	rtify to the veracity and completeness or employee of this lobbying firm has	of the information submitted herein; the made an expenditure in violation of Section 1.	hat no reportable compensation has ection 11.045, F.S.	
Date:	Signature:	Title:		
Dutt.	(Original Signature Required)		enior Partner, Officer, or Owner of Lobbying Firn	

(3)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):		
,	City of Doral	City of Lauderdale Lakes	City of Miami	City of Miramar	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	8300 NW 53rd St, Ste 100, Doral, FL 33166	4300 NW 36th St, Lauderdale Lakes, FL 33319	3500 Pan American Dr, Miami, FL 33133	2300 Civic Center Pl, Miramar, FL 33025	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	(305) 593-6725	(954) 535-2740	(305) 250-5300	(954) 602-3115	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Telephone Number of Principal  Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \perp \\ \per	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0- \\ \\$\\$1 to \\$9,999 \\ \\$\\$10,000 to \\$19,999 \\ \\$\\$20,000 to \\$29,999 \\ \\$\\$30,000 to \\$39,999 \\ \\$\\$40,000 to \\$49,999 \\ \\$\\$1f \\$50,000 or more, provide specific dollar amount rounded up or down to nearest \\$1,000:\\$\\ \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \le \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
				96 Div.	
V	Check if additional principals are listed	d on another page.			
(7)			of the information submitted herein; the made an expenditure in violation of Se		
	Date:	Signature: (Original Signature Required)	Title:		
	Date.	Signatul C.	1146.	nior Partner, Officer, or Owner of Lobbying Firm	

	City of North Miami	City of North Miami Beach	City of Pinellas Park	City of Sunny Isles Beach	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	•	17011 NE 19th Ave, North Miami Beach, FL 33179	5141 78th Ave North, Pinellas Park, FL 33780	18070 Collins Ave, Sunny Isles Beach, FL 33160	
	776 NE 125th St, North Miami, FL 33161 Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	•		(727) 541-0700	( ) (305) 792-1765	
	() (305) 893-6511 Telephone Number of Principal	() (305) 948-2900 Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$-0- \$1 to \$9,999 \$10,000 to \$19,999 \$20,000 to \$29,999 \$30,000 to \$39,999 \$40,000 to \$49,999  If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Telephone Number of Principal  Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}cccccccccccccccccccccccccccccccccc	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	Dusiness Address of Timespar	-	-	deray August	
☑	Telephone Number of Principal  Check if additional principals are lister	Telephone Number of Principal  d on another page.	Telephone Number of Principal	Telephone Number of Principal 1999 1999 1999 1999 1999 1999 1999 19	
(7)	<u>CERTIFICATION</u> : I hereby cer been omitted; and that no officer o	tify to the veracity and completeness or employee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has ection 11.045, F.S.	
	Date:	Signature:	Title:		
	Date:	Original Signature Required)	i ilie:	nior Partner, Officer, or Owner of Lobbying Firm)	

		obbying Firm during the reporting period			
	City of Sunrise	City of Tallahassee	City of West Palm Beach	<b>Consolidated Credit Counseling Services</b>	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	777 Sawgrass Corporate Pkwy, Sunrise, FL 33325	300 S Adams St, Tallahassee, FL 32301	200 Second St, 5th Floor, West Palm Beach, FL 33401	5701 W Sunrise Blvd, Ft Lauderdale, FL 33331	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	(954) 746-3250	( ) (850) 891-8181	( ) (561) 822-1400	( ) (954) 377-9102	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$-0-\$1 to \$9,999 \$10,000 to \$19,999 \$20,000 to \$29,999 \$30,000 to \$39,999 \$40,000 to \$49,999 \$1f \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$  Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0\$-} \\ \text{\$\text{\$1\$}} \text{\$0\$} \\ \text{\$0\$} \text{\$0\$} \\ \text{\$\text{\$0\$}} \\ \text{\$0\$} \\	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal		
	() Telephone Number of Principal	() Telephone Number of Principal	Telephone Number of Principal	Business Address of Principal  ( )  Telephone Number of Principal	
Ø	Check if additional principals are listed	d on another page.		AM 9: 07	
(7)		tify to the veracity and completeness or employee of this lobbying firm has a			
	Date:	Signature:	Title:		
1	Dut.	Signature: (Original Signature Required)	IIIC	enior Partner, Officer, or Owner of Lobbying Firm)	

(5)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):		
,	<b>Coral Springs Improvement District</b>	Diabetes Research Institute Foundation, Inc.	Dolphins Stadium	Eagle Brands, Inc.	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	10300 NW 11th Manor, Coral Springs, FL 33071	3440 Hollywood Blvd, Ste 100, Hollywood, FL 33021	2269 Dan Marino Blvd, Miami Gardens, FL 33056	3201 NW 72nd Ave, Miami, FL 33122	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	(954) 753-0380	( ) (954) 964-4040	(305) 626-7410	(305) 599-2337	
		Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Telephone Number of Principal  Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Telephone Number of Principal  Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\\$\\$\$ 10,000 to \$19,999 \$\Begin{array}{c} \\$20,000 to \$29,999 \$\Begin{array}{c} \\$30,000 to \$39,999 \$\Begin{array}{c} \\$40,000 to \$49,999 \$\Begin{array}{c} \\$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$\Begin{array}{c} \Begin{array}{c} arr	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{l} \text{Solution} Sol	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
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(7)			of the information submitted herein; the made an expenditure in violation of So		
	Date:	Signature:	Title:		
	Date	(Original Signature Required)		enior Partner, Officer, or Owner of Lobbying Firm)	
		(Original diguature Requireu)	(Bi	mor a money, or owner or morelying riting	

(5)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):	
	Florida Association of Forensic Professionals	Florida Power & Light	Florida Regional Councils Association	Floridians for Lower Insurance Costs
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	14000 E Palomino Dr, Southwest Ranches, FL 33320	215 S Monroe St, Ste 810, Tallahassee, FL 32301	2999 NE 191 St, PH6, Aventura, FL 33180	117 S Gadsen St, Tallahassee, FL 32301
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	(954) 434-0930	( ) (850) 224-7517	(305) 935-1866	(850) 201-3207
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$-0- \$1 to \$9,999 \$10,000 to \$19,999 \$20,000 to \$29,999 \$30,000 to \$39,999 \$40,000 to \$49,999  If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\Begin{array}{c} \\$1 to \\$9,999 \\ \$\\$10,000 to \\$19,999 \\ \$\\$20,000 to \\$29,999 \\ \$\\$30,000 to \\$39,999 \\ \$\\$40,000 to \\$49,999 \\ \$\Iff \\$50,000 or more, provide specific dollar amount rounded up or down to nearest \\$1,000:\\$\\$\\$50,000.00 \\  \$\Begin{array}{c} \Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\Begin{array}{c} \\$1 to \\$9,999\$ \$\Begin{array}{c} \\$10,000 to \\$19,999\$ \$\Begin{array}{c} \\$20,000 to \\$29,999\$ \$\Begin{array}{c} \\$30,000 to \\$39,999\$ \$\Begin{array}{c} \\$40,000 to \\$49,999\$ \$\Begin{array}{c} \\$16,000 or more, provide \\$50,000 or more, provide \\$50,000 or more to nearest \\$1,000:\\$\$  \$\Begin{array}{c} \Begin{array}{c}	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{l} \perp \\ \perp  \perp \\ \perp \
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
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	<b>T</b>	Signature:	Title:	
	Date:	Sianatura.	1 itie:	

General Tobacco	GL Homes of Florida Corporation	Gold & Associates, P.A.	<b>Greater Miami Chamber of Commerce</b>
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
2980 NW 108th Ave, Miami, FL 33172	1600 Sawgrass Corporate Pkwy, Ste 300, Sunrise, FL 33323	2050 Coral Way, Ste 602, Coral Gables, FL 33145	1601 Biscayne Blvd, Miami, FL 33132
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
( ) (305) 500-9595	(954) 753-1730	( ) (305) 858-9390	( ) (305) 577-5489
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	Total compensation provided or owed to the obbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$ 50,000.00
Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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Date:	Signature:	Title:	nior Partner, Officer, or Owner of Lobbying Firm

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):						
	Health Choice Network	Hollywood Greyhound Track	Indian River County	Interior Design Associations Foundation		
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal		
	9064 NW 13th Terr, Miami, FL 33172	831 Federal Hwy, Hallandale, FL 33009	1840 25th St, Vero Beach, FL 32960	250 Royal Ct, Delray Beach, FL 33444		
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal		
	( ) (305) 599-1015	(954) 924-3200	( ) (772) 226-1408	( ) (561) 272-6855		
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal		
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0- \\ \\ \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0-} \\ \text{\$\text{\$\text{\$}}\$} \text{\$\text{\$}} \$\t	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0\$-} \\ \text{\$\text{\$\text{\$}}\$} \text{\$\text{\$}} \text{\$\text{\$}}\$} \text{\$\text{\$}} \text{\$\text{\$}} \text{\$\text{\$}}\$} \text{\$\text{\$}} \text{\$\text{\$}} \text{\$\text{\$}}\$} \text{\$\text{\$}} \text{\$\text{\$}} \text{\$\text{\$}} \text{\$\text{\$}}\$} \text{\$\text{\$}} \$\	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{l} \text{-0} \\ \text{2} \text{1} \text{to \$9,999} \\ \$\Begin{array}{l} \text{10,000 to \$19,999} \\ \$\Begin{array}{l} \text{20,000 to \$29,999} \\ \$\Begin{array}{l} \text{30,000 to \$39,999} \\ \$\Begin{array}{l} \text{30,000 or more, provide} \\ \$\text{specific dollar amount rounded up or down to nearest \$1,000:\$\Begin{array}{l} \text{Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.} \end{array}		
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:		
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal		
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal		
	( ) Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal State		
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(7)			of the information submitted herein; the made an expenditure in violation of Se			
	Date:	Signature: (Original Signature Required)	Title:(Se	nior Partner, Officer, or Owner of Lobbying Firm)		

(5)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):	
	Lealman Special Fire Control District	Miami Beach Community Health Center	Miami Heart Research Institute, Inc.	Miami Project/Buoniconti Fund to Cure Paralysis
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	4017 56th Ave N, St Petersburg, FL 33174	710 Alton Rd, Miami Beach, FL 33139	4770 Biscayne Blvd, Ste 500, Miami, FL 33137	Lois Pope Life Center, 1095 NW 14th Terr, Miami, FL 33136
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	(727) 526-5650	(305) 695-2184	( ) (305) 674-3020	( ) (305) 243-7146
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\textstyle \textstyle \te	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}cccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} -0 - \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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(7)	<b>CERTIFICATION:</b> I hereby cert been omitted; and that no officer of	tify to the veracity and completeness or employee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has
	Date:	Signature: (Original Signature Required)	Title:	enior Partner, Officer, or Owner of Lobbying Firm)

Miami-Dade County	Miami-Dade County Public Schools	Mount Sinai Medical Center	NASDAQ-100 Open	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
111 NW First St, Ste 1032, Miami, FL 33128	1450 NE 2nd Ave, Miami, FL 33132	4300 Alton Rd, Miami Beach, FL 33139	150 Alhambra Plaza, Ste 825, Coral Gables, FL 33134	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
( ) (305) 375-5600	(305) 995-2532	(305) 674-2520	(305) 442-3367	
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$39,999 □\$40,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$63,000.00  □ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{l} \text{\$-0\$-} \\ \text{\$\sigma\$} \$\	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
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		of the information submitted herein; the made an expenditure in violation of Se		
Date:	Signature:	Title:		

LRO Compensation Form (3/2006)

Neptune Wholesale	New Horizons Community Mental Health Center, Inc.	North Broward Hospital District	Pinellas County Board of County Commissioner	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
768 E Dania Beach Blvd, Dania, FL 33004	1313 NW 36th St, Ste 400, Miami, FL 33142	303 SE 17th St, Ft Lauderdale, FL 33316	315 Court St, Clearwater, FL 33756	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
(954) 920-6770	( ) (305) 635-0366	( ) (954) 355-5180	(727) 464-3485	
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \$\Begin{array}{c} \\$1 to \\$9,999 \\ \$\Begin{array}{c} \\$10,000 to \\$19,999 \\ \$\Begin{array}{c} \\$20,000 to \\$29,999 \\ \$\Begin{array}{c} \\$30,000 to \\$39,999 \\ \$\Begin{array}{c} \\$40,000 to \\$49,999 \\ \$\Begin{array}{c} \Begin{array}{c} \\$50,000 or more, provide \\ \$specific dollar amount rounded up or down to nearest \\$1,000:\\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	
			Pennington, Moore, Wilkinson, Bell & Dunbar, P.A	
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
			215 S Monroe St, 2nd Floor, Tallahassee, FL 3230	
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
()	() Telephone Number of Principal	() Telephone Number of Principal	(850) 222-3533	
Telephone Number of Principal  Check if additional principals are listed		retepnone Number of Principal	Telephone Number of Principal	
) <u>CERTIFICATION</u> : I hereby cert been omitted; and that no officer or	r employee of this lobbying firm has i	of the information submitted herein; the made an expenditure in violation of So	nat no reportable compensation has ection 11.045, F.S.	

LRO Compensation Form (3/2006)

(5)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):		
	Preferred Medical Plan	Public Health Trust-Jackson Memorial Hospital	Recording for the Blind & Dyslexic Florida	South Broward Hospital District	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	4950 SW 8th St, Coral Gables, FL 33134	1611 NW 12th Ave, Miami, FL 33136	6704 SW 80th St, Miami, FL 33143	1131 N 35th Ave, Hollywood, FL 33021	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
	( ) 305-648-4000	( ) 305-585-6754	( ) 305-666-0552	954-985-3451	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$		Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$ □  Check if this compensation was received	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \Pi^{\chi_0} \\ \Pi^{\chi	
	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:	
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	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
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	Date:	Signature:	Title:		
		(Original Signature Required)	(Se	enior Partner, Officer, or Owner of Lobbying Firm)	

LRO Compensation Form (3/2006) Page 2

(5)	For each Principal represented by the L	obbying Firm during the reporting period	(continued from page 1):	
	South Florida Provider Coalition	Spectrum Programs & Miami Behavioral Health Center, Inc.	St. Lucie County	Sunshine Water Control District
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	2140 S. Dixie Hwy, Ste 205, Miami, FL 33161	11031 NE 6th Ave, Miami, FL 33161	2300 Virginia Ave, Ft. Pierce, FL 34982	10300 NW 11th Manor, Coral Springs, FL 33071
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	( \ \ 305-858-3335	305-757-0602	772-462-1450	954-753-0380
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	Total compensation provided or owed to the obbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$
	☐ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	☐ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:
	Full Name of Principal	me of Principal  Full Name of Principal		Full Name of Principal
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
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(7)	CERTIFICATION: I hereby cer been omitted; and that no officer o	tify to the veracity and completeness r employee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has ection 11.045, F.S.
1	Date:	Signature:	Title:	
	Dutt.	(Original Signature Required)	(Se	enior Partner, Officer, or Owner of Lobbying Firm)

	Teva Pharmaceuticals, USA	Town of Cutler Bay	United Health Care	University of Miami
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	444 N. Capitol St NW, Ste 399, Rogers, AR 72758	8230 SW 192nd St, Cutler Bay, FL 33157	701 Pennsylvania Ave NW, Ste 530, Washington, DC 20004	Ashe Admin. Bldg, Rm 230, Coral Gables, FL 33146
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	( ) 479-464-4612	( ) 305-373-5313	202-383-6408	( ) 305-284-4330
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\\\\$\\$-0-\$ \$\\$\\$1 to \$\\$9,999\$ \$\\\\$\\$10,000 to \$\\$19,999\$ \$\\\\$\\$20,000 to \$\\$29,999\$ \$\\\\$\\$30,000 to \$\\$39,999\$ \$\\\\$\\$40,000 to \$\\$49,999\$ \$\\\\$\\$\\$If \$\\$50,000 or more, provide specific dollar amount rounded up or down to nearest \$\\$1,000:\$\\\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
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7)	<b>CERTIFICATION:</b> I hereby cer been omitted; and that no officer o	tify to the veracity and completeness or employee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has ection 11.045, F.S.
	Date:	Signature:	Title:	

	Vanguard Car Rental USA, Inc.	Village of Bal Harbour	Village of Palmetto Bay	Village of Royal Palm Beach	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	6929 N. Lakewood Ave, Ste 100, Tulsa, OK 74117	655 96th St, Bal Harbour, FL 33154	8950 SW 152nd St, Palmetto Bay, FL 33157	1050 Royal Palm Beach Blvd, Royal Palm Beach, FL 33411	
_	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
,	918-401-6447	( ) 305-866-4633	( ) 305-259-1234	( <u>)</u> 561-790-5174	
,	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0-  □\$1 to \$9,999  □\$10,000 to \$19,999  □\$20,000 to \$29,999  □\$30,000 to \$39,999  □\$40,000 to \$49,999  □If \$50,000 or more, provide specific dollar amount rounded up or	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amounted up or	Total compensation provided or owed to the obbying firm for the reporting period:  \$\_\$-0-\$ \$\_\$1 to \$9,999\$ \$\_\$10,000 to \$19,999\$ \$\_\$20,000 to \$29,999\$ \$\_\$30,000 to \$39,999\$ \$\_\$40,000 to \$49,999\$ \$\_{1f} \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$	
	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	down to nearest \$1,000:\$  Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	down to nearest \$1,000:\$  Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work	
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	
			( )	( )	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
1	Check if additional principals are liste	d on another page.		3	
)	<b>CERTIFICATION:</b> I hereby cerbeen omitted; and that no officer of	tify to the veracity and completeness remployee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has ection 11.045, F.S.	
		Signature:	Title:		

Page 2 LRO Compensation Form (3/2006)

Vitas Healthcare Corporation	Wal-Mart	West Flagler Kennel Club, Inc.	Westchester General Hospital
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
100 S. Biscayne Blvd, 15th Floor, Miami, FL 33132-2304	1505 Ft Clarke Blvd, #13-202, Gainesville, FL 32606	401 NW 38th Ct, Miami, FL 33126	2500 SW 75th Ave, Miami, FL 33155
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
305-350-5913	( ) 479-644-8771	( ) 305-649-3000	305-264-5252
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □\$1,50,000 or more, provide	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □[\$50,000 or more, provide	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide	Total compensation provided or owed to the obbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide
specific dollar amount rounded up or down to nearest \$1,000: \$	specific dollar amount rounded up or down to nearest \$1,000:\$	specific dollar amount rounded up or down to nearest \$1,000:\$	specific dollar amount rounded up or down to nearest \$1,000:\$
Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
()	Telephone Number of Principal	()	Marie 1 to 1
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	
			AM 9: 03 PATION DIV.
Check if additional principals are liste	ed on another page.		× °
been omitted; and that no officer of	rtify to the veracity and completeness or employee of this lobbying firm has	of the information submitted herein; t made an expenditure in violation of S	hat no reportable compensation has ection 11.045, F.S.
Date:	Signature:	Title:	

	White Rock Quarries	City of Tamarac	<b>Metro Dade Auto Tag Dealers Association</b>	· · · · · · · · · · · · · · · · · · ·
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	101 Sansbury's Way, West Palm Beach, FL 33411	7525 NW 88th Ave, Tamarac, FL 33321	14760 Biscayne Blvd, North Miami Beach, FL 33181	
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	( ) (561) 793-2102	(954) 724-1230	(305) 252-3393	( )
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
	Total compensation provided or owed to the lobbying firm for the reporting period:  □\$-0- □\$1 to \$9,999 □\$10,000 to \$19,999 □\$20,000 to \$29,999 □\$30,000 to \$39,999 □\$40,000 to \$49,999 □If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \\ \\$1 to \\$9,999 \\ \$\\$10,000 to \\$19,999 \\ \$\\$20,000 to \\$29,999 \\ \$\\$30,000 to \\$39,999 \\ \$\\$40,000 to \\$49,999 \\ \$\\$If \\$50,000 or more, provide specific dollar amount rounded up or down to nearest \\$1,000:\\$\\ \$\Begin{array}{c} \\$ Check if this compensation was received from a lobbying firm subcontracting work on	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{l} \subseteq \text{-0} \\  \$\Begin{array}{l} \subseteq \te
	behalf of a principal.  Name and address of principal originating work:	behalf of a principal.  Name and address of principal originating work:	behalf of a principal.  Name and address of principal originating work:	behalf of a principal.  Name and address of principal originating work:
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
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	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	( )	( )	( )	
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
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]	Check if additional principals are listed	d on another page.		
7\	CEDTIFICATION: I hereby corr	ify to the vergeity and completeness	of the information submitted herein; the	nat no reportable compensation has
')	been omitted; and that no officer of	r employee of this lobbying firm has	made ap expenditure in violation of So	ection 11.045, F.S.
	Date: 6/10/06		/ de	President/COO
	- 10/10/10/16	Signature:	Title:	Wase standard Call

#### FLORIDA LEGISLATURE—LEGISLATIVE BRANCH LOBBYING

				202211.0
<b>OUARTERLY</b>	CON	IPENSA	TION	REPORT

										- L
(1)	Quarter Ending (check one):	March 31, 2006	☐ June 30,	2006	☐ Se	ptember 30, 2006		December	31, 2006	
(2)	Lobbying Firm Information			(3)	List Name(s	of Firm's Lobb	yists Reg	istered durii	ng reporting period:	
	Spearman Management, Inc			1	Spearman	Guy	M			
	Name of Lobbying Firm				Last	First	MI	Last	First	MI
	516 Delannoy Avenue Cocoa, FL 32922				McCarthy	Lauren	L			
	Business Address of Lobbying Firm (Street, City, State	te, and Zip)		-	Last	First	MI	Last	Pirst —	MI
				-					[7, C)	
					Last	First	MI	Last	First F	MI
	(321) 631-2750	·		1	Last	First	MI	Last	First	MI
	Business Phone (including area code)					rust dditional names are o			S. S.	1411
(4)	Total compensation provided or owed to	the lobbying firm from	n ALL principals	durin	g the reportin	g period (check a	appropri	ate box):	<u> </u>	
(1)			100,000 to \$249,999		\$250,000 to \$49		,000 to \$9		□\$1,000,000 or more	
(5)	For each Principal represented by the L	obbying Firm during t	he reporting perio	d:						
	Anheuser-Busch Companies, Inc	Associated Industries of	Florida			lemorial Foundation	1	Capital Heal		
	Full Name of Principal	Full Name of Principal	FL	Fu	ıll Name of Princip	pal		Full Name of	· — —	
	106 E. College Avenue Tallahassee 32301	P.O. Box 784 Tallahasse	ee 32302		IC AMF KSC, F				ville Place Tallahassee 323	08
	Business Address of Principal	Business Address of Princ	ipal		usiness Address of	t Principal	:		lress of Principal	
	(854) 222-2771 Telephone Number of Principal	(850) 224-7173 Telephone Number of Prir	ncinal	T.	321) 452-2887 elephone Number	of Principal		(850) 383-3 Telephone Nu	3300 umber of Principal	
(6)	•	•	•		•	-	ha.	-	sation provided or owed to the	
(6)	Total compensation provided or owed to the lobbying firm for the reporting period:	Total compensation provid lobbying firm for the repor		lo	bbying firm for the	provided or owed to the reporting period:	iic	lobbying firm	for the reporting period:	
	□\$-0-	<b>,≥</b> 0-			<b>I\$-</b> 0-			□\$-0-	0	
	□\$1 to \$9,999 □\$10,000 to \$19,999	□\$1 to \$9,999 □\$10,000 to \$19,999		Ä	\$1 to \$9,999 \$10,000 to \$19,99	9		□\$10,000 to \$	5 \$19,999	
	<b>25</b> 20,000 to \$29,999	□\$20,000 to \$29,999			1\$20,000 to \$29,99			□\$20,000 to \$	\$29,999	
	□\$30,000 to \$39,999	□\$30,000 to \$39,999			1\$30,000 to \$39,99	9		□\$30,000 to \$		
	□\$40,000 to \$49,999 □If \$50,000 or more, provide	□\$40,000 to \$49,999 □If \$50,000 or more, prov	rida		1\$40,000 to \$49,99 11f \$50,000 or more			□\$40,000 to \$	\$49,999 or more, provide	
	specific dollar amount rounded up or	specific dollar amount rour		ST	pecific dollar amou	nt rounded up or			r amount rounded up or	
ı	down to nearest \$1,000: \$	down to nearest \$1,000:\$_	<b>r</b>	d	own to nearest \$1,0	000:\$		down to neare		•
	☐ Check if this compensation was received	Check if this compe			Check if this compensation was received			☐ Check if this compensation was received		
	from a lobbying firm subcontracting work on behalf of a principal.	from a lobbying firm sul behalf of a principal.	beontracting work on		rom a lobbying fi chalf of a princip	rm subcontracting w al.	ork on	from a lobby behalf of a p	ying firm subcontracting wo principal.	rk on
	Name and address of principal originating work:	Name and address of princ	cipal originating work:			of principal originating	g work:	-	dress of principal originating	work:
	Full Name of Principal	Full Name of Principal		Ī	Full Name of Princ	ipal		Full Name of	f Principal	
	Business Address of Principal	Business Address of Prin	cipal	Ĭ	Business Address o	f Principal		Business Add	dress of Principal	<del></del>
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	Telephone Number of Principal	Telephone Number of Pri	incipal	- 7	Telephone Numbe	r of Principal		Telephone N	Number of Principal	<del></del>

City of Titusville	DeHart and Darr Associates	Eckerd Youth Alternatives, Inc	Florida Chiropractic Association, Inc
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
2000 S. Washington Ave. Titusville, FL 32780	1360 Beverly Road S-201 McLean, VA 22101	P.O. Box 7450 Clearwater, FL 34618	217 N. Kirkman Road S-1 Orlando, FL 32811
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
(324) 269-3221	(703) 448-1000	(727 <sub>)</sub> 461-1236	(727) 572-4665
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\Begin{array}{c} \\$-0- \\ \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
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	tify to the veracity and completeness r employee of this lobbying firm has		
Date: 6-13-06	Signature: My M Aull	Title: /	0.1.1

	Florida Institute of Technology	Galaxy Fireworks	The Paxen Group	Peoples Gas System, Inc
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	150 W. University Blvd. Melbourne, FL 32901	204 W. MLK Blvd Tampa, FL 33603	710 Atlantis Road Melbourne, FL 32901	P.O. Box 111 Tampa, FL 33601
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	(3 <del>21</del> ) 720-1441	(800) 334-2264	(321) 724-1033	(850) 681-6785
	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}cccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\sigma\$\\$-0- \$\sigma\$\\$1 to \$\\$9,999 \$\sigma\$\\$10,000 to \$\\$19,999 \$\sigma\$\\$20,000 to \$\\$29,999 \$\sigma\$\\$30,000 to \$\\$39,999 \$\sigma\$\\$40,000 to \$\\$49,999 \$\sigma\$\\$60,000 or more, provide specific dollar amount rounded up or down to nearest \$\\$1,000:\$\sigma\$  Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:
	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
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Z	Telephone Number of Principal  Check if additional principals are lister	Telephone Number of Principal  d on another page.	Telephone Number of Principal	Telephone Number of Principal
<b>-</b> か	CERTIFICATION: I hereby cert been omitted; and that no officer of the Date:	tify to the veracity and completeness or employee of this lobbying firm has a Signature:	of the information submitted herein; t made an expenditure in violation of S Title:	hat no reportable compensation has

Philip Morris USA, Inc by its service company Altria Corp Services	PRIDE Enterprises	South Newspaper Group	Tampa Electric Company
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
333 N. Point Center E S-615 Alpharetta, GA 30022	12425 28th St N. St. Petersburg, FL 33716	P.O. Box 419000 Melbourne, FL 32941	P.O. Box 111 Tampa, FL 33601
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
(6晉) 297-9365	(727) 556-3347	(321) 242-3777	(850) 681-6785
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{c} \\$-0-\$ \\ \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	Total compensation provided or owed to the lobbying firm for the reporting period:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Total compensation provided or owed to the obbying firm for the reporting period:  \$\B\$\_0-\$ \$\B\$\_10,000 to \$19,999 \$\B\$\_20,000 to \$29,999 \$\B\$\_30,000 to \$39,999 \$\B\$\_40,000 to \$49,999 \$\B\$\_1f \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000:\$  \$\B\$ \$\B\$ Check if this compensation was received from a lobbying firm subcontracting work or behalf of a principal.  Name and address of principal originating work
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
Business Address of Principal	Business Address of Principal	Business Address of Principal	
			Business Address of Principal
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Check if additional principals are list	ed on another page.		A BUIST 21 PA
CERTIFICATION: I hereby ce	rtify to the veracity and completeness	of the information submitted herein: the	nat no reportable compensation has
	or employee of this lobbying firm has		
Date: 6-13-06			

Full Name of Principal P.O. Box 111 Tampa, FL 33661 Butness Address of Principal  (856) 681-6785 Telephone Number of Principal Full Name of Principal Full Name of Principal  (856) 289-5612 Telephone Number of Principal Full Name	TECO Energy, Inc	Unisys Corporation	Val-Pak Direct Marketing System, Inc	Verizon
Business Address of Principal  (856) 298-5612  (850) 298-5612  (850) 298-5612  (727) 399-3072  (856) 222-6304  Telephone Number of Principal  Total compensation provided or owed to the lobbying firm for the reporting period: 15-0- 25-		Full Name of Principal	Full Name of Principal	Full Name of Principal
Business Address of Principal  (854) 681-6785 (850, 298-5612 (850, 298-5612 (727) 399-3072 (858) 222-6304  Telephone Number of Principal  Total compensation provided or owed to the lobbying firm for the reporting period: US-0- MS1 to 89,999 US120,000 to \$19,999 US120,000 to \$29,999 US130,000 to \$29,999 US130,000 to \$39,999 US140,000 to \$49,999 US140,000 to \$49,999 US16 \$0,000 to \$29,999 US16 \$0,000 to \$39,999 US16 \$0,000 to \$39,999 US16 \$0,000 to \$49,999 US17 \$0,000 to \$49,999 US17 \$0,000 to \$49,999 US18 \$0,000 to \$49,999	P.O. Box 111 Tampa, FL 33601	1545 Raymond Diehl Road Tallahassee 32308	8605 Largo Lakes Dr. Largo, FL 33773	106 E. College Avenue S-810 Tallahassee 32301
Telephone Number of Principal Teleph				
Telephone Number of Principal	√8 <del>54</del> \ 681-6785	(850) 298-5612	(727) 399-3072	(850) 222-6304
Obbying firm for the reporting period:   Obbying firm for the reporting period:   Os-0-  St to \$9.999	Telephone Number of Principal			
Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal originating work:	Total compensation provided or owed to the	Total compensation provided or owed to the	Total compensation provided or owed to the	Total compensation provided or owed to the
Si to \$9.999	lobbying firm for the reporting period:			
Sit to \$9,999				
Si 10,000 to \$19,999				
S20,000 to \$29,999   S20,000 to \$29,999   S20,000 to \$29,999   S20,000 to \$39,999   S20,000 to \$39,999   S40,000 to \$39,999   S40,000 to \$49,999   S40,000			≥\$10,000 to \$19,999	
S30,000 to \$39,999				
□ Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.    Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal   Full Name of Principal   Telephone Number o	· ·			
Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.				· · · · · · · · · · · · · · · · · · ·
specific dollar amount rounded up or down to nearest \$1,000; \$				
down to nearest \$1,000: \$ down to neare \$1,000: \$ down to nearest \$1,000: \$ down to neare \$1,000: \$ down to nearest \$1,000: \$ down to neare \$1,0				specific dollar amount rounded up or
from a lobbying firm subcontracting work on behalf of a principal.  Name and address of principal originating work:  Name and address o				
Full Name of Principal  Business Address of Principal  ()  Telephone Number of Principal  Telephone Number of Principal  Check if additional principals are listed on another page.  CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.	from a lobbying firm subcontracting work on	from a lobbying firm subcontracting work on	from a lobbying firm subcontracting work on	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
Business Address of Principal  Telephone Number of Principal	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work
Business Address of Principal  Telephone Number of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal (S)
Telephone Number of Principal  Check if additional principals are listed on another page.  CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.				20 0000 20 0000 21 0000
Telephone Number of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
Check if additional principals are listed on another page.  CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.	( )	( )		
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.				<u>-</u> 10
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.				To the second
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11,045, F.S.				and and and
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.				<u> </u>
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.				É O
CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.		·		
been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.	Check if additional principals are listed	on another page.		• *
been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.	CEDTIFICATION, 111	3C-4-41	C41 * C 4* 11 * 4	
	been omitted; and that no officer or	ity to the veracity and completeness (	of the information submitted herein; the made an expenditure in violation of Section 1985.	nat no reportable compensation has ection 11.045. F.S.
Date: 6-/3-06 Signature: M. M. Against Signature Required)  Title: M. M. Signature (Senior Partner, Officer, or Owner of Lobbying)		N		

Wal-Mart Stores, Inc	Wuesthoff Health Systems		
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
702 SW 8th St. Bentonville, AR 72716	110 Longwood Avenue Rockledge, FL 32955		
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
(474) 644-8771	(321) 636-2211	( )	( )
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
Total compensation provided or owed to the	Total compensation provided or owed to the	Total compensation provided or owed to the	Total compensation provided or owed to the
lobbying firm for the reporting period:	lobbying firm for the reporting period:	lobbying firm for the reporting period:	obbying firm for the reporting period:
□\$-0-	□\$-0-	□\$-0-	□\$-0-
□\$1 to \$9.999	□\$1 to \$9,999	□\$1 to \$9,999	□\$1 to \$9,999
□\$10,000 to \$19,999	≥\$10,000 to \$19,999	□\$10,000 to \$19,999	□\$10,000 to \$19,999
<b>■\$20,000 to \$19,999</b>	□\$20,000 to \$29,999	□\$20,000 to \$29,999	□\$20,000 to \$29,999
□\$30,000 to \$39,999	□\$30,000 to \$39,999	□\$30,000 to \$39,999	□\$30,000 to \$39,999
□\$40,000 to \$49,999	□\$40,000 to \$49,999	□\$40,000 to \$49,999	□\$40,000 to \$49,999
□If \$50,000 or more, provide	□If \$50,000 or more, provide	☐If \$50,000 or more, provide	☐If \$50,000 or more, provide
specific dollar amount rounded up or	specific dollar amount rounded up or	specific dollar amount rounded up or	specific dollar amount rounded up or
down to nearest \$1,000: \$	down to nearest \$1,000:\$	down to nearest \$1,000:\$	down to nearest \$1,000:\$
Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Check if this compensation was receive from a lobbying firm subcontracting work or behalf of a principal.
Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work:	Name and address of principal originating work
Full Name of Principal	Full Name of Principal	Full Name of Principal	Full Name of Principal
			<u> </u>
Business Address of Principal	Business Address of Principal	Business Address of Principal	Business Address of Principal
	( )		Maria Sanana
Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal	Telephone Number of Principal
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Check if additional principals are liste	d on another page.		PN IZ: 51
	tify to the veracity and completeness or employee of this lobbying firm has		hat no reportable compensation has
	i employee of this loodying firm has i	made an expenditure in violation of S	60000 11.045, r.s.
Date: 6-13-06	Signature: M. Allaus	Title:	Druge L. X